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## Listing of the Claims

1. (currently amended) A computer-implemented method for providing insurance information across a network, comprising:

receiving an access code from a user via the network;

receiving a password from a user via the network;

executing computer-implemented instructions for determining the a user class of the user from the access code and password;

in the event that the user is an agent, permitting the agent to enter insurance information for an insured;

storing the insurance information along with the date and time of entry as a record in a database;

executing computer-implemented instructions for generating an access code and password corresponding to the insured;

in the event that the user is a holder, permitting the holder to view insurance information for the insured corresponding to the holder's insured's access code and password;

receiving a set of requirements from the holder via the network; and executing computer-implemented instructions for displaying an exception report to the holder, the exception report indicating which of the insurance information violated the set of requirements. insured's

- 2. (currently amended) The method of claim 1, wherein a holder may enter a plurality of access codes and passwords via the network, each of the plurality of access codes and passwords corresponding to a single insured of a plurality of insureds.
- 3. (currently amended) The method of claim 2, further comprising: permitting the holder to view insurance information for each of the plurality of insureds simultaneously via the network; and

displaying a compliance report to the holder, the compliance report indicating which of each of the plurality of insureds' insurance information violates the set of requirements.

- 4. (original) The method of claim 3, wherein the compliance report is presented as a table, the table having one row corresponding to each of the plurality of insureds and one column corresponding to each requirement of the set of requirements.
  - 5. (canceled)

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inputting at a computer in the network an access code and password for at least one insured:

receiving via the network at least one insurance record comprised of at least one category of insurance coverage for the at least one insured;

inputting at a computer in the network at least one user-specified insurance requirement;

executing computer-implemented instructions for comparing the insurance record to the user-specified insurance requirement; and displaying the results of the comparison.

7. (currently amended) The method of claim 6, wherein the step of computer-implemented instructions for comparing the insurance record to the user-specified insurance requirement comprises computer-implemented instructions for:

determining whether the user has specified a coverage minimum for at least one insurance category;

determining from the at least one category of insurance coverage comprising the at least one insurance record whether the at least one insured's coverage meets or exceeds the coverage minimum;

creating a table, the table comprised of at least one row corresponding to each of the at least one insured and at least one column corresponding to each of the at least one categories of insurance coverage, the intersection of the at least one row and at least one column forming at least one cell; and

placing in the at least one cell an indicator corresponding to the results of determining whether the at least one insured's coverage meets or exceeds the coverage minimum.

- 8. (original) The method of claim 7, wherein the indicator further indicates whether the at least one insured's coverage is cancelled or expired.
- 9. (original) The method of claim 8, wherein the indicator indicating that the at least one insured's coverage is expired is the date of expiration.

## 10. (canceled)

- 11. (new) The method of claim 1, further comprising executing a division function for limiting the contents of the exception report.
- 12. (new) The method of claim 12, wherein the division function includes at least one of the following categories: subsidiary, division, region, branch office, project, territory location, or product.
- 13. (new) The method of claim 1, wherein the set of requirements received from the holder are minimum insurance requirements the holder requires of the insured.

- 14. (new) The method of claim 6, further comprising providing the holder with a compliance report for at least one of a plurality of requirement sets.
- 15. (new) A system of providing proof of an insured's insurance via a network, comprising:

at least one computer-readable medium;

computer-implemented instructions provided on the at least one computer-readable medium, the computer-implemented instructions for:

receiving insurance information for proof of insurance from an agent for an insured of the agent;

storing the insurance information electronically in a database; and providing the insurance information and from the database over a network to a holder.

- 16. (new) The system of claim 15, further comprising computerimplemented instructions for generating a compliance report summarizing the compliance status of each coverage for all insureds.
- 17. (new) The system of claim 15, wherein providing the insurance information to the holder is for each insured for whom the holder has an access code and password.

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18. (new) The system of claim 15, further comprising computerimplemented instructions for issuing electronic notices to the holder.

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- 19. (new) The system of claim 15, further comprising computerimplemented instructions for indicating whether the at least one insured's coverage is cancelled or expired.
- 20. (new) The system of claim 15, further comprising computerimplemented instructions for providing a holder with internet access to the insurance information from a centralized certificate storage repository.
- 21. (new) The system of claim 15, further comprising computerimplemented instructions for comparing certificates to a holders custom requirements.
- 22. (new) The system of claim 15, further comprising computerimplemented instructions for validating insurance ratings by at least one independent rating organization.